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VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS (37 CFR 1.9(d) AND 1.27 (c)) - SMALL BUSINESS CONCERN			Docket No. 48995	
Serial No.	SEP 24 2001 Filing Date July 24, 2001	Patent No.	Issue Date	
Applicant/ Patentee: Kovar et al.				
Invention: ENZYME DEGRADABLE CURABLE RESIN COMPOSITIONS				
<p>I hereby declare that I am:</p> <p><input type="checkbox"/> the owner of the small business concern identified below:</p> <p><input checked="" type="checkbox"/> an official of the small business concern empowered to act on behalf of the concern identified below:</p> <p>NAME OF CONCERN: <u>Foster-Miller, Inc.</u></p> <p>ADDRESS OF CONCERN: <u>350 Second Avenue; Waltham, Massachusetts 02154</u></p> <p>I hereby declare that the above-identified small business concern qualifies as a small business concern as defined in 13 CFR 121.3-18, and reproduced in 37 CFR 1.9(d), for purposes of paying reduced fees under Section 41(a) and (b) of Title 35, United States Code, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third party or parties controls or has the power to control both.</p> <p>I hereby declare that rights under contract or law have been conveyed to and remain with the small business concern identified above with regard to the above identified invention described in:</p> <p><input type="checkbox"/> the specification filed herewith with title as listed above.</p> <p><input checked="" type="checkbox"/> the application identified above.</p> <p><input type="checkbox"/> the patent identified above.</p> <p>If the rights held by the above-identified small business concern are not exclusive, each individual, concern or organization having rights to the invention is listed on the next page and no rights to the invention are held by any person, other than the inventor, who could not qualify as an independent inventor under 37 CFR 1.9(c) or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).</p>				

Each person, concern or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:

- ☒ no such person, concern or organization exists.
☐ each such person, concern or organization is listed below.

FULL NAME _____
 ADDRESS _____

☐ Individual ☐ Small Business Concern ☐ Nonprofit Organization

FULL NAME _____
 ADDRESS _____

☐ Individual ☐ Small Business Concern ☐ Nonprofit Organization

FULL NAME _____
 ADDRESS _____

☐ Individual ☐ Small Business Concern ☐ Nonprofit Organization

FULL NAME _____
 ADDRESS _____

☐ Individual ☐ Small Business Concern ☐ Nonprofit Organization

Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27)

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

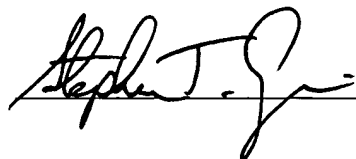
NAME OF PERSON SIGNING: Steven T. Azarian

TITLE OF PERSON SIGNING _____

OTHER THAN OWNER: General Counsel / CLERK

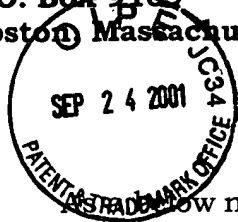
ADDRESS OF PERSON SIGNING: 350 Second Avenue
Waltham, MA 02154

SIGNATURE: _____



DATE: _____

8/1/01



DECLARATION AND POWER OF ATTORNEY

I, the below named inventor, I hereby declare that: My residence, post office address and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed at 201) below or an original, first and joint inventor (if plural names are listed at 201-208 below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

ENZYME DEGRADABLE CURABLE RESIN COMPOSITIONS

which is described and claimed in:

- ☐ the specification attached hereto.
- ☒ the specification filed on July 24, 2001.
- ☐ the specification in PCT international application Number _____, filed on _____; and was amended on _____.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a). I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

Prior Foreign/PCT Applications and Any Priority Claims Under 35 U.S.C. §119:			
Application No.	Filing Date	Country	Priority Claimed Under 35 U.S.C. §119?
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO

I hereby claim the benefit under 35 U.S.C. §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below, and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose material information as defined in 37 CFR §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:

Prior U.S. Applications or PCT International Applications Designating the U.S-Benefit Under 35 U.S.C. §120					
U.S. Applications		Status (Check One)			
Application Serial No.	U.S. Filing Date	Patented	Pending	Abandoned	
PCT Applications Designating the U.S.					
Application No.	Filing Date	U.S. Serial No. Assigned			

**CLAIM FOR BENEFIT OF PRIOR U.S. PROVISIONAL APPLICATION(S)
(35 U.S.C. §119(e))**

I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below:

Applicant	Provisional Application Number	Filing Date
Kovar et al.	60/220,617	July 25, 2000

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) with full powers of association, substitution and revocation to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

David G. Conlin (Reg. No. 27,026)
George W. Neuner (Reg. No. 26,964)
Linda M. Buckley (Reg. No. 31,003)
Peter J. Manus (Reg. No. 26,766)
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201	FULL NAME OF INVENTOR	LAST NAME KOVAR	FIRST NAME Robert	MIDDLE NAME F.
	RESIDENCE & CITIZENSHIP	CITY Wrentham	STATE OR FOREIGN COUNTRY Massachusetts	COUNTRY OF CITIZENSHIP U.S.A.
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 203 Beach Street	CITY Wrentham	STATE OR COUNTRY AND ZIP CODE Massachusetts 02093

202	FULL NAME OF INVENTOR	LAST NAME ORBEY	FIRST NAME Nese	MIDDLE NAME
	RESIDENCE & CITIZENSHIP	CITY Acton	STATE OR FOREIGN COUNTRY Massachusetts	COUNTRY OF CITIZENSHIP U.S.A.
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 7 Oxbow Drive	CITY Acton	STATE OR COUNTRY AND ZIP CODE Massachusetts 01720

I hereby further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further, that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Signature of Inventor 201 <i>Robert Kovar</i> Date: 08/07/2001	Signature of Inventor 202 <i>Nese Orbey</i> Date: 8/2/2001
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